DOCUMENT RESUME

ED 089 846 PS 007 053

TITLE	TARCOG Home Start Program.
INSTITUTION	Top of Alabama Regional Council of Governments, Huntsville. Human Resources Program.
SPONS AGENCY	Office of Child Development (DHEW), Washington, D.C.
PUB DATE	[73]
NOTE	6p.
EDRS PRICE	MF-$0.75 HC-$1.50 PLUS POSTAGE
DESCRIPTORS	Compensatory Education Programs; *Disadvantaged Youth; Health Services; *Intervention; Nutrition; *Parent Education; *Parent Participation; *Program Descriptions; Psychological Services; Social Services
IDENTIFIERS	TARCOG Home Start

ABSTRACT

This report describes the Top of Alabama Regional Council of Governments (TARCOG) Home Start Program. Five aspects of the program are presented. (1) The nutrition component is aimed at helping parents make the best use of food resources through good planning, buying, and cooking. (2) The health program involves provision of medical and dental services to the target children of Home Start, and to siblings and parents when possible. (3) Psychological and social services include family counseling by Home Start staff members, and referral and consultation services by mental health agencies in the area. (4) The education component focuses on parent instruction. Educational materials are provided for use at home, and parents work with the children at a Home Start center one day a week. A daily television show for the children is included in the program. (5) The major emphasis of Home Start is on Parent Involvement. Parents are considered the major source of help for their own children. They learn to improve interactions with the child at home, and are encouraged to communicate openly with peers at group meetings. Also, participation in community decision making is strongly encouraged. Staff development is a major concern of the TARCOG program and pre-service workshop and ongoing in-service training experiences are described. Finally, discussion focuses on the benefits of the regional approach and interagency cooperation. (DP)

ED 089846

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TARCOG

(Top of Alabama Regional Council of Governments)

HOME START PROGRAM

INTRODUCTION

Tens of thousands of children from throughout the United States will suffer unimaginable hardships because of the lethal combination of ignorance and poverty. Some of these children will die because of inadequate health care; some will be permanently affected because of diets made up largely of starches and sugars; many will not finish secondary schools; some will join the ranks of delinquents because of learning disabilities that could have been treated in the early years; and many will undoubtedly be added to the welfare rolls when they reach adulthood.

The TARCOG Home Start Program, comprised of five North Alabama counties—DeKalb, Jackson, Limestone, Madison, and Marshall—hopes to change the directions of some of these children and their families through a five-component program which includes: nutrition, health, psychological and social services, education, and parent involvement. This last component, parent involvement, is the key to the program. In the words of Dr. Ann O'Keefe, Director of the National Home Start Program, "The Home Start Program focuses on enhancing the quality of children's lives by building upon existing family strengths and utilizing parents in the role as the first and most important educators of their own children." Thus, Home Start aims at involving parents as the major means of helping the child.

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The U. S. Office of Child Development awarded a grant of $100,000 to the TARCOG Home Start project, which has been in operation since July 1, 1972. Twelve professionals and paraprofessionals, serving as coordinator, health and nutrition consultants, and home visitors, work with 98 families and 125 children being served by Home Start. The Home Start Program, one of 16 in the nation, is expected to be in operation for three years.

A major portion of the project's success depends on the effectiveness of the home visitors in dealing with the Home Start parents. The six home visitors, who carry a caseload of 12 to 18 families, are responsible for furnishing the parents with educational materials and nutritional and health care information. They also demonstrate and instruct the parents in the use of these materials and suggest ways to solve individual problems. Consultation from agencies in the community are also utilized by the home visitors and parents.

The materials and instructions which are distributed by the home visitors, teachers, and Home Start staff are aimed at the following objectives:

(1) improving the parents' understanding of early child development and appropriate tasks and responsibilities for children;
(2) familiarizing parents with local agencies and services such as employment agencies, health services, welfare, and education;
(3) generating an awareness of family planning; and
(4) stimulating parents' interests and active roles in the affairs of Home Start and Community Action programs.

FIVE COMPONENTS OF TARCOG HOME START PROGRAM

1. Education: The educational component of this program includes daily 30-minute television programs, supplementary materials and instruction for parents, and work with the children one day a week in seven Home Start centers. The TV lessons and accompanying materials were developed by specialists in early childhood education, art, music, and drama at the Appalachia Educational Laboratory of Charleston, West Virginia.

2. Health: The health of the parents and children is one of the principal concerns of the Home Start Program. All children have been given physical and dental examinations; and when funds are available, physical examinations will be given to the parents and siblings. All innoculations are provided free of charge by the five county health departments.

3. Nutrition: In the Home Start Program, the nutrition component is aimed primarily at helping parents make the best use of food resources through good planning,

buying, and cooking. However, when food is not available to a family, the Home Start staff makes every effort to provide the food or refer the family to a public program where food stamps and commodities may be obtained.

County Home Demonstration agencies are utilized for nutrition education, consultations on nutrition values, and training in diet planning. The Home Start staff participates and receives in-service training in nutrition. Well-planned nutritional snacks are prepared and served to all Home Start children in the centers. Recommended nutritionally balanced menus are sent to parents to be prepared in the homes. Home Start is concerned with identifying the nutritional needs of parents and children and aiding them to become healthy and knowledgeable members of their communities.

4. Social-Psychological Services: The needed psychological and social services are provided first by the Home Start staff through counseling with parents on family problems which may involve areas of need such as family planning, job opportunities, child development, family communication, adult education, and general family welfare. The home visitor meets periodically with the Home Start Coordinator to discuss specific problems which the home visitor is unable to solve or to handle. Strategies are prepared for the home visitor to initiate; the Coordinator assists in any technical or referral procedure. The Coordinator visits all problem areas and in homes which need special attention. Some consulting services are also required. The Coordinator determines when psychological testing, if any, is given to children entering public schools or who need any special screening while in the program. This screening will disclose children with problems and allows for remediation much earlier in life than would otherwise be the case.

The various mental health associations, rehabilitation agencies, private practitioners, and other service agencies provide referral and consultation services. Teachers working with children in the centers are able to screen the children for learning disabilities. Individual programs will be developed for these children. In order to effectively implement these programs, a tri-pronged approach involving staff, parents, and inter-agency cooperation has been employed.

5. Parent Involvement:

a. Interaction in the home: The core of the TARCOG Home Start Program is interaction between the parent and the child in the home setting. Teaching and learning together not only strengthens the child-parent bond but also serves as an impetus for initiating basic changes in the home environment.

b. Interaction in parent group meetings: Because inter-parent communication decreases the degree of alienation so commonly found in the Home Start target population, monthly meetings are held to enhance and increase communication between parents. Mutual needs, concerns, and interests are cited and discussed. Sharing of talents and hobbies such as sewing and cooking are common group activities. From this mutual sharing, group projects are frequently developed. For example, an individual's interest in needlework may lead the entire group into a sewing project.

When deemed necessary by the group and the home visitor, outside consultants attend the group meetings. Expertise in such fields as effective commodity use and planned budgeting is available and utilized. Coordination of both the group and the home interaction is accomplished by the home visitor.

c. Interaction on a regional basis: The Policy Council is composed of ten parents representing the seven pocket areas and nine agency representatives from the TARCOG area. The Council has set forth the following objectives:

i. to involve the whole community, parents, laymen and professionals in encouraging, guiding, and advising the Home Start Program;

ii. to set goals to assure the fullest development of the children and their parents in the program; and

iii. to work in cooperation with the Grantee in the formulation and writing of the proposals for funding to include any suggestions that the Grantee thinks might be helpful for the Program.

STAFF DEVELOPMENT

One major area of the Home Start Program is that of the professional growth of both professional staff and home visitors. Toward this end, a pre-service workshop as well as ongoing in-service training are considered essential.

The pre-service workshop utilized a comprehensive, five-dimensional approach to staff development. Health, nutrition, education, social-psychological services, and parent involvement were the essential components. Held in August of 1972, and prior to program implementation, the workshop included approximately 50 consultants and

synthesized a multi-media approach to staff preparation. The workshop was held at The University of Alabama in Huntsville, and three hours of college credit in Early Childhood Development was given to 17 Home Start and Head Start staff members for their participation at the workshop. This also was considered part of the career development program.

Essential to program success is continuing staff growth and updating; therefore, bi-monthly staff meetings are held. Planned and developed on the basis of feedback and need as determined by staff and parent input, these meetings include discussion of mutual and individual areas of concern, technical assistance from outside consultants, and introduction of innovative methodological techniques.

Although staff meetings have proven informative and beneficial, individualized staff development is also vital to the Program's success. Members of the professional staff consult with home visitors on a one-to-one basis, utilizing role-playing and simulation techniques where individual needs arise.

COOPERATION: HOW WE WORK TOGETHER

The prime reason for a regional approach to social, educational, health, and nutritional problems is that many agencies, paraprofessionals, and laymen can work in tandum toward alleviation of these problems. Utilizing resources found in a multi-county area, as well as participating in state and national child development programs, the team approach has been an effective tool by which common Home Start problems have been attacked by common effort.

Mutual sharing of ideas is evidenced by the consultative services provided by the TARCOG Home Start staff to state, regional, and national meetings. In addition, assistance to newly beginning Home Start Programs, relative to planning, problem-solving, implementation, and evaluation, has been provided by TARCOG Home Start to programs such as the Three Rivers Educational Cooperative in New Albany, Mississippi.

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Intra- and inter-agency sharing is evidenced by services coordinated and received by TARCOG Home Start. Enhancing and reinforcing regionality as an approach to mutual problem-solving, the following local, state, and federal resources have been utilized:

Local	State	Federal and Regional
Schools	Governor's Office	OCD Home Start Office
Merchants	Alabama State Department of Education	Appalachian Regional Commission
Churches	State Training Offices	Appalachia Educational Laboratory
Aging Program	Junior Colleges	OCD Assistant Regional Director's Office
Health Departments	Senior Colleges and Universities	Tri-State Training Office
Mental Health Programs	Alabama Development Office	TVA
Commercial and Educational Television	Home Demonstration Agencies	NASA
Follow Through Program		
Community Action Committies		
Comprehensive Child Care Program		
Adult Education Programs		
Pensions & Security Depts.		
Physicians and Dentists		

Alabama statewide telecasting of the "Around the Bend" television series was made possible by the Alabama ETV Commission and the Alabama State Department of Education.